

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA
2001/02
FORM **460**

Date Stamp

Statement covers period

from 01/01/2017

through 12/31/2017

Date of election if applicable:
(Month, Day, Year)

06/05/2018

Page 1 of 65

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1399704

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Ben Pak for Board of Equalization 2018

STREET ADDRESS (NO P.O. BOX)

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Long Beach | CA | 90802 | (562)983-0815 |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|
|------|-------|----------|-----------------|

OPTIONAL: FAX/E-MAIL ADDRESS

562-983-0187 / gary@crummittandassociates.com

Treasurer(s)

NAME OF TREASURER
Gary Crummitt

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Long Beach | CA | 90802 | 562-983-0815 |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|
|------|-------|----------|-----------------|

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2018 By Gary Crummitt
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/31/2018 By Ben Pak
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Ben Pak

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Sought: Board of Equalization Member

Board of Equalization District

3

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Long Beach

CA

90802

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

Ben Pak for Assembly 2018

I.D. NUMBER

1395726

NAME OF TREASURER

Gary Crummitt

CONTROLLED COMMITTEE?

☒ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

Long Beach

STATE

CA

ZIP CODE

90802

AREA CODE/PHONE

562-983-0815

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

| | |
|--|---|
| Statement covers period from 01/01/2017 through 12/31/2017 | CALIFORNIA FORM 460 Page 3 of 65 I.D. NUMBER 1399704 |
|--|---|

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------------|--------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 | \$107,608.00 | \$107,608.00 |
| 2. Loans Received | Schedule B, Line 7 | \$0.00 | \$0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | \$107,608.00 | \$107,608.00 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | \$0.00 | \$0.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | \$107,608.00 | \$107,608.00 |

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

| | 1/1 through 6/30 | 7/1 to Date |
|---------------------------|------------------|-------------|
| 20. Contribution Received | \$0.00 | \$0.00 |
| 21. Expenditures Made | \$0.00 | \$0.00 |

Expenditures Made

| | | | |
|--|----------------------|-------------|-------------|
| 6. Payments Made | Schedule E, Line 4 | \$38,890.37 | \$38,890.37 |
| 7. Loans Made | Schedule H, Line 7 | \$0.00 | \$0.00 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | \$38,890.37 | \$38,890.37 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | \$50,991.65 | \$50,991.65 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | \$0.00 | \$0.00 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | \$89,882.02 | \$89,882.02 |

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

| Date of Election (mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Current Cash Statement

| | | | |
|---|---|--------------|--|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$0.00 | To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any). |
| 13. Cash Receipts | Column A, Line 3 above | \$107,608.00 | |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | \$0.00 | |
| 15. Cash Payments | Column A, Line 8 above | \$38,890.37 | |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | \$68,717.63 | |
| If this is a termination statement, Line 16 must be zero. | | | |
| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | \$0.00 | |

Cash Equivalents and Outstanding Debts

| | | |
|-----------------------------|---------------------------------------|-------------|
| 18. Cash Equivalents | See instructions on reverse | \$0.00 |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | \$50,991.65 |

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

| | | |
|---|--|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 01/01/2017 | | |
| through 12/31/2017 | | Page 4 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/1/2017 | A&H Architects Inc. Los Angeles, CA 90006 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| 12/15/2017 | Acumedi Health Center Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 5/15/2017 | Andrew Seo CHB Garden Grove, CA 92845 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | Belasco Management Corporation Los Angeles, CA 90015 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$2,000.00 | 2018P: \$2,000.00 |

SUBTOTAL

Schedule A Summary

| | |
|---|---------------------------|
| 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) | \$107,300.00 |
| 2. Amount received this period - unitemized contributions of less than \$100 | \$308.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) | TOTAL \$107,608.00 |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>5</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/15/2017 | Belasco Management Corporation Los Angeles, CA 90015 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$2,000.00 | 2018P: \$2,000.00 |
| 12/15/2017 | Brookhurst Town Center LLC La Crescenta, CA 91214 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 6/18/2017 | Cana Resource Group Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$3,000.00 | \$3,000.00 | 2018P: \$3,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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OTH - Other
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SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 |
| Page <u>6</u> of <u>65</u> | | |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/15/2017 | Carpenter, Zuckerman & Rowley Beverly Hills, CA 90211 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | jlevy@czrlaw.com | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Orig Ctrb Date: 6/19/2017 | Jimmy Chai Santa Ana, CA 92705 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Jimmy Chai Real Estate | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/10/2017 | Edward Chang Riverside, CA 92506 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | University California Riverside Professor | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Orig Ctrb Date: 6/13/2017 | Joo Young Chang Anaheim, CA 92805 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hermes Inc. Sales | \$250.00 | \$250.00 | 2018P: \$250.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
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COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 7 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/25/2017 | Arthur Charchian Glendale, CA 91205 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Law Offices of Arthur S. Charchian Attorney | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/21/2017 | Sharon Chew Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Retired | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |

SUBTOTAL

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from 01/01/2017 through 12/31/2017 | CALIFORNIA FORM 460 |
| | Page 8 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/15/2017 | Jennifer Cho La Crescenta, CA 91214 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | LAUSD Teacher | \$250.00 | \$250.00 | 2018P: \$250.00 |
| 11/13/2017 | Randy Cho Los Angeles, CA 90068 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | T Shirts Haven Inc. Graphic Designer | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Orig Ctrb Date: 6/15/2017 | Kyung H. Choe La Crescenta, CA 91214 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Alpha Asset Partners, LLC Managing Partner | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/21/2017 | Andrew Choi Santa Fe Springs, CA 90670 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Ace Commercial Manager | \$700.00 | \$700.00 | 2018P: \$700.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>9</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/15/2017 | Carol Choi Irvine, CA 92603 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | United Exchange Corp. Executive Vice President | \$2,500.00 | \$2,500.00 | 2018P: \$2,500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 10/24/2017 | Kyu Choi Chicago, IL 60630 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Kyu Choi DF Wireless Inc. | \$500.00 | \$500.00 | 2018P: \$500.00 |
| 11/21/2017 | Mikyung Choi Glendale, CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Homemaker | \$600.00 | \$600.00 | 2018P: \$600.00 |
| Orig Ctrb Date: 5/23/2017 | Ricky H. Choi Los Angeles, CA 90020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Edgewood Partners Insurance Center Vice President | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>10</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/6/2017 | Dorothea Hui Chong North Hollywood, CA 91605 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Korean Institute of Southern California School Administrator | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/23/2017 | Edward J. Chong Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Law office of Edward J. Chong Attorney | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
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(other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>11</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/22/2017 | Chol H. Chu Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | CYNY Management, Inc. President | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 8/22/2017 | Cleopatra Medical Aesthetics Los Angeles, CA 90006 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$300.00 | \$300.00 | 2018P: \$300.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/19/2017 | Cosmos Food Co. Inc. City Of Industry, CA 91745 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
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| | | I.D. Number 1399704 |

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NAME OF FILER

Ben Pak for Board of Equalization 2018

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 5/30/2017 | Council on China Exchange, Inc. Claremont, CA 91711 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/15/2017 | DD & H Investment Inc. Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$300.00 | \$300.00 | 2018P: \$300.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 10/30/2017 | David Do Washington, DC 20010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | District of Columbia Government Executive Director | \$250.00 | \$250.00 | 2018P: \$250.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 |
| Page <u>13</u> of <u>65</u> | | |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/15/2017 | EKK Investments Inc. Los Angeles, CA 90004 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 8/22/2017 | Euther Investment Inc. La Canada, CA 91011 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/1/2017 | Julia Gouw Pasadena, CA 91107 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Retired | \$2,000.00 | \$2,000.00 | 2018P: \$2,000.00 |
| Orig Ctrb Date: 6/16/2017 | Great LLC Los Angeles, CA 90021 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$100.00 | \$100.00 | 2018P: \$100.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
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| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | GTR Consulting Group, Inc., dba Golden Tree Realty Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/26/2017 | Augustine Han Northridge, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Shire Engineer | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>15</u> of <u>65</u> |
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 8/22/2017 | Home Appliance Sales Marketing Service Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/15/2017 | Jihee Huh Rolling Hills, CA 90274 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pacific American Fish Company Vice Chairman | \$2,500.00 | \$2,500.00 | 2018P: \$2,500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | William Hwang Los Angeles, CA 90042 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Herald News Paper Media | \$500.00 | \$500.00 | 2018P: \$500.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|--|--|---|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 Page <u>16</u> of <u>65</u> |
| I.D. Number 1399704 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/15/2017 | Hwarang Leo Club Simi Valley, CA 93063 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/28/2017 | Iguasu Trading U.S.A., Inc. dba Vlado Footwear Los Angeles, CA 90007 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,500.00 | \$2,500.00 | 2018P: \$2,500.00 |
| 12/15/2017 | Jun Im Los Angeles, CA 90020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Haute Fox, Inc. President | \$100.00 | \$100.00 | 2018P: \$100.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | |
|---|----------------------------|
| Statement covers period from <u>01/01/2017</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | |
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SEE INSTRUCTIONS ON REVERSE

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|---|------------------------|
| NAME OF FILER Ben Pak for Board of Equalization 2018 | I.D. Number 1399704 |
|---|------------------------|

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/15/2017 | Lawrence S. Jeon Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lawrence Jeon CPA Certified Public Accountant | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/22/2017 | Ricardo Jerez Chino Hills, CA 91709 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Miller & Chavez Law Firm Office Manager | \$350.00 | \$350.00 | 2018P: \$350.00 |
| Orig Ctrb Date: 6/18/2017 | Kay Jin Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Law Offices of John H. Oh Legal Administrator | \$700.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | |
|---|----------------------------|
| Statement covers period from <u>01/01/2017</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | |
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number

1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/15/2017 | Kay Jin Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Law Offices of John H. Oh Legal Administrator | \$300.00 | \$1,000.00 | 2018P: \$1,000.00 |
| 12/28/2017 | Connie Chung Joe South Pasadena, CA 91030 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Korean American Family Services Executive Director | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 6/21/2017 | John H. Lee, CPA Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/16/2017 | Kai Cre Inc. Los Angeles, CA 90017 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,000.00 | \$2,000.00 | 2018P: \$2,000.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|--|--|---|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 Page <u>19</u> of <u>65</u> I.D. Number 1399704 |
| | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/28/2017 | Kitaek Kang La Canada Flintridge, CA 91011 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Koreanair Regional Manager | \$100.00 | \$100.00 | 2018P: \$100.00 |
| 12/23/2017 | Bernard Khalili Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Bernard Khalili Real Estate Management | \$500.00 | \$500.00 | 2017P: \$500.00 |
| 12/27/2017 | Arang Kim Los Angeles, CA 90006 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Arang Kim Fashion Designer | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 6/6/2017 | Briana Kim Buena Park, CA 90621 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Briana Kim, PC Attorney | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| SUBTOTAL | | | | | | |

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| | | |
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| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
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| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/16/2017 | David Kim Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cedars- Sinai Physician | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/23/2017 | James Sang Woo Kim Los Angeles, CA 90005 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Kim & Lee, LLP Certified Public Accountant | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 21 of 65 |
| I.D. Number | | 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/12/2017 | Kenneth Kim Costa Mesa, CA 92626 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | American Association for Respiratory Care Physician | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/28/2017 | Kenneth T. Kim Newport Beach, CA 92660 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Retired | \$2,000.00 | \$2,000.00 | 2018P: \$2,000.00 |
| 12/15/2017 | Kisoo Kim Vernon, CA 90058 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Ace & Reve Clothing, Inc. Owner | \$300.00 | \$300.00 | 2018P: \$300.00 |
| 12/3/2017 | Melissa Kim Cypress, CA 90630 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Chase Senior Home Lending Advisor | \$100.00 | \$100.00 | 2018P: \$100.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 22 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 11/30/2017 | Richard Y. Kim Glendale, CA 91210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Los Angeles City Attorneys Office Attorney | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Orig Ctrb Date: 6/18/2017 | Sung- Hwan Kim Los Angeles, CA 90012 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Apex Advisors Certified Public Accountant | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/28/2017 | Sungsoo Kim Fullerton, CA 92835 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Komen Termite Operator | \$5,000.00 | \$5,000.00 | 2018P: \$5,000.00 |
| Orig Ctrb Date: 6/6/2017 | Terang Kim Glendale, CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Edison International Principal Advisor | \$250.00 | \$550.00 | 2018P: \$550.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 23 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/27/2017 | Terang Kim Glendale, CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Edison International Principal Advisor | \$300.00 | \$550.00 | 2018P: \$550.00 |
| Orig Ctrb Date: 6/15/2017 | Thomas Kim Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | New York Life Insurance Agent | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/23/2017 | Thomas Y. Kim Northridge, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Comfy USA Owner | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>24</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 8/22/2017 | Yang Uk Kim Laguna Niguel, CA 92677 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Re Max Real Estate Agent | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/27/2017 | Younghee Kim Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Young H. Kim Certified Public Accountant | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 6/29/2017 | Kim & Lee, LLP Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>25</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | Yun Jung Ko Pasadena, CA 91107 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Harbage Consulting Outreach Specialist | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | J.B. Koh Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Apex Advisors Tax Advisor | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 26 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/6/2017 | Angel Kou Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | The Agency Real Estate Agent | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/14/2017 | Judy Kwon La Canada Flintridge, CA 91011 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Prima Escrow Owner | \$400.00 | \$400.00 | 2018P: \$400.00 |
| 11/3/2017 | Yul Kwon Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Freeway Apparel | \$200.00 | \$200.00 | 2018P: \$200.00 |
| 12/15/2017 | Law Offices of Chang Ryul Ji, PC. Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>27</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 5/15/2017 | Law Offices of John H. Oh & Associates Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,500.00 | 2018P: \$1,500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/15/2017 | Law Offices of John H. Oh & Associates Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$1,500.00 | 2018P: \$1,500.00 |
| Orig Ctrb Date: 5/23/2017 | Law Offices of Kil & Sinkov Los Angeles, CA 90005 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 28 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number

1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/18/2017 | J. Kim Lawrence Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | City of Los Angeles Fire Department Firefighter | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/19/2017 | Brad Lee Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Brad Lee, A Prof. Law Corp Attorney | \$250.00 | \$250.00 | 2018P: \$250.00 |
| 12/12/2017 | Changhoon Charles Lee Stevenson Ranch, CA 91381 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Reliant Tax Consulting Consultant | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Orig Ctrb Date: 5/15/2017 | Danilo Lee Marina Del Rey, CA 90292 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | DLO Media Corp. President | \$200.00 | \$200.00 | 2018P: \$200.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>29</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/15/2017 | Elizabeth Lee Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Homemaker | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Orig Ctrb Date: 6/6/2017 | Eun Suk Lee Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lee Eun Suk Owner | \$300.00 | \$300.00 | 2018P: \$300.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | Helen Lee Los Angeles, CA 90036 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Apex Advisors Tax Manager | \$250.00 | \$250.00 | 2018P: \$250.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 30 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/22/2017 | Robert Lee Santa Clarita, CA 91350 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Elite EB-5 Solutions, LLC Chief Executive Officer | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/30/2017 | Steven Lee Santa Clarita, CA 91350 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | K2L Group, Inc. Business Development Manager | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Orig Ctrb Date: 6/15/2017 | Sue J. Lee San Marino, CA 91108 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sohofashion, Inc. Chief Executive Officer | \$500.00 | \$500.00 | 2018P: \$500.00 |
| SUBTOTAL | | | | | | |

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 31 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | T. Lee Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | T. Lee Consulting Owner | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | Lee & OH A Professional Law Corporation Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |

SUBTOTAL

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>32</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 8/22/2017 | Lee Group Investment Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/15/2017 | Jason Leem Northridge, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | HaHa Magazine Writer | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/15/2017 | Jingbo Lou Los Angeles, CA 90005 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | J Lou Architect Architect | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>33</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/18/2017 | Terri P. Luong Rosemead, CA 91770 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Marsh Insurance Services Sales Person | \$300.00 | \$300.00 | 2018P: \$300.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/6/2017 | Eunok Anna Ma Los Angeles, CA 90005 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Chicago Title Sales Representative | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 34 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 11/28/2017 | Won Sik Myung Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pava World President | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| 11/17/2017 | John Nahm Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Strong Ventures Managing Partner | \$200.00 | \$200.00 | 2018P: \$200.00 |
| 11/28/2017 | John Noh Tustin, CA 92782 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Mr. Cooper Home Loans Vice President | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Orig Ctrb Date: 6/16/2017 | Shirley Oseki- Rivas Los Angeles, CA 90029 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Los Angeles Unified School District Teacher | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>35</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/15/2017 | Pacific Liberty Law APC Los Angeles, CA 90015 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 6/18/2017 | Hyo K. Pak Los Angeles, CA 90019 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hy K. Pak Real Estate Agent | \$300.00 | \$300.00 | 2018P: \$300.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/28/2017 | Kyung Sik Pak Los Angeles, CA 90020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Liz Fashion Owner | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Orig Ctrb Date: 8/22/2017 | Richard S. Pak North Hollywood, CA 91602 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Richard Pak Loan Broker | \$250.00 | \$250.00 | 2018P: \$250.00 |
| SUBTOTAL | | | | | | |

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(other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 36 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/31/2017 | Soon Pak Los Angeles, CA 90020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Bonita Fabrics, Inc. Owner | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Orig Ctrb Date: 6/6/2017 | Papermoon Los Angeles, CA 90015 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/28/2017 | Ann Park Torrance, CA 90503 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cooland Inc. Owner | \$250.00 | \$250.00 | 2018P: \$250.00 |

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>37</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

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|---------------------------------|---|---|--|-----------------------------|---|--|
| Orig Ctrb Date: 6/26/2017 | Jean Park Porter Ranch, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | United Way Major Gift Manager | \$1,500.00 | \$8,800.00 | 2018P: \$7,300.00 2018G: \$1,500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/26/2017 | Jean Park Porter Ranch, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | United Way Major Gift Manager | \$7,300.00 | \$8,800.00 | 2018P: \$7,300.00 2018G: \$1,500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/6/2017 | Jinku Park Buena Park, CA 90621 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | MxF Designs, Inc. President | \$300.00 | \$300.00 | 2018P: \$300.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
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| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>38</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/23/2017 | Ki Hong Park Aliso Viejo, CA 92656 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Chun Ha Insurance Insurane Agent | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 7/23/2017 | Roy Park Porter Ranch, CA 91326 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Los Angeles Superior Court Attorney | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

| | | |
|--|--|---|
| Statement covers period from 01/01/2017 through 12/31/2017 | | CALIFORNIA FORM 460 Page 39 of 65 |
| I.D. Number 1399704 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 11/28/2017 | Seongae Park Irvine, CA 92602 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Kobe Steakhouse Manager | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Orig Ctrb Date: 5/15/2017 | Youngsun Park Huntington Beach, CA 92649 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Park & Asher Attorney | \$4,400.00 | \$4,400.00 | 2018P: \$4,400.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/14/2017 | Prima Escrow, Inc. Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Orig Ctrb Date: 5/16/2017 | Project Vintage Inc. Houston, TX 77003 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| SUBTOTAL | | | | | | |

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SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 40 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/5/2017 | Robert Schwartz Encino, CA 91436 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Los Angeles City Collge Foundation Executive Director | \$100.00 | \$100.00 | 2018P: \$100.00 |
| Orig Ctrb Date: 6/18/2017 | William Hanjoon Shin Los Angeles, CA 90010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Golden Tree Realty Real Estate Broker | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/19/2017 | Smart A & C Inc. Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$7,300.00 | \$14,600.00 | 2018P: \$7,300.00 2018G: \$7,300.00 |

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SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 |
| Page <u>41</u> of <u>65</u> | | |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

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|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/15/2017 | Phillip Son Hacienda Heights, CA 91745 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pacific Coast Segregation Certified Public Accountant | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/29/2017 | Jason Song La Mirada, CA 90638 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | City National Bank Banker | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/27/2017 | Joe Song Los Angeles, CA 90015 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | GNS Fashion Owner | \$300.00 | \$300.00 | 2018P: \$300.00 |

SUBTOTAL

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>42</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/15/2017 | Chul Soo Los Angeles, CA 90012 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Korean Times Reporter | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/23/2017 | Sorores Inc. dba Wilshire Adult Day Health Care Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 11/27/2017 | Dalila Sotelo Los Angeles | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Integral Developer | \$100.00 | \$200.00 | 2018P: \$200.00 |

SUBTOTAL

*Contributor Codes
IND - Individual
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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through | 12/31/2017 | Page 43 of 65 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

I.D. Number
1399704

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/31/2017 | Dalila Sotelo Los Angeles | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Integral Developer | \$100.00 | \$200.00 | 2018P: \$200.00 |
| Orig Ctrb Date: 8/22/2017 | Sugar Nail Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/14/2017 | Synergy Endodontics Palm Desert, CA 92660 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2018P: \$1,000.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>44</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 5/17/2017 | The Propose, Inc. Los Angeles, CA 90021 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200.00 | \$200.00 | 2018P: \$200.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/6/2017 | The Zenobia, Inc. Los Angeles, CA 90021 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 8/22/2017 | TJ Marketing Los Angeles, CA 90019 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200.00 | \$200.00 | 2018P: \$200.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | | CALIFORNIA FORM 460 |
| Page <u>45</u> of <u>65</u> | | |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|--|-----------------------------|---|--|
| Trnsfr Dt: 11/9/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/14/2017 | Top Properties Corporation Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$7,300.00 | \$14,600.00 | 2018P: \$7,300.00 2018G: \$7,300.00 |
| 12/15/2017 | USKN Inc Los Angeles, CA 90010 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$300.00 | \$300.00 | 2018P: \$300.00 |
| 12/15/2017 | Yilan Wang Glendale, CA 91201 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | N/A Homemaker | \$500.00 | \$500.00 | 2018P: \$500.00 |
| 12/27/2017 | William Wong Sacramento, CA 95822 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Bill Wong LLC Consultant | \$250.00 | \$250.00 | 2018P: \$250.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>46</u> of <u>65</u> |
| | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Orig Ctrb Date: 6/30/2017 | Kenneth Woo Monterey Park, CA 91755 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cal Sun Executive Director | \$2,400.00 | \$2,800.00 | 2018P: \$2,800.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/5/2017 | Kenneth Woo Monterey Park, CA 91755 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cal Sun Executive Director | \$200.00 | \$2,800.00 | 2018P: \$2,800.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 5/16/2017 | Kenneth Woo Monterey Park, CA 91755 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cal Sun Executive Director | \$200.00 | \$2,800.00 | 2018P: \$2,800.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>47</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/15/2017 | Woolee, Inc. Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Orig Ctrb Date: 5/31/2017 | Chong Chun Yi La Canada, CA 91011 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hammer Collection Wholesaler | \$500.00 | \$500.00 | 2018P: \$500.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| Orig Ctrb Date: 6/22/2017 | Steve Yi Vernon, CA 90058 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Mansfield Textiles, Inc. President | \$2,000.00 | \$2,000.00 | 2018P: \$2,000.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|---|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> | | CALIFORNIA FORM 460 |
| through <u>12/31/2017</u> | | |
| | | Page <u>48</u> of <u>65</u> |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 12/27/2017 | Angela Yoon Los Angeles, CA 90042 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | County of Los Angeles Analyst | \$350.00 | \$350.00 | 2018P: \$350.00 |
| Orig Ctrb Date: 6/6/2017 | Nancy E. Yoon Calabasas, CA 91302 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Nancy Yoon, Inc. Developer | \$250.00 | \$250.00 | 2018P: \$250.00 |
| Trnsfr Dt: 11/15/2017 | ***TRANSFER*** Ben Pak for Assembly 2018 Long Beach, CA 90802 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 10/24/2017 | Paul Yoon Brea, CA 92821 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Los Angeles Unified School District Financial Analyst | \$100.00 | \$100.00 | 2018P: \$100.00 |
| SUBTOTAL | | | | \$107,300.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 01/01/2017
through 12/31/2017

CALIFORNIA
FORM **460**

Page 49 of 65

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|--|---|---|--|--|---|--|--------------------------------------|---|
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | RATE % | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | RATE % | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | RATE % | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

| | |
|--|-----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | CALIFORNIA FORM 460 |
| | Page <u>50</u> of <u>65</u> |
| I.D. Number 1399704 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

| FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | LOAN | AMOUNT GUARANTEED THIS PERIOD | CUMULATIVE TO DATE | BALANCE OUTSTANDING TO DATE |
|--|--|---|----------------------------------|-------------------------------------|--|-----------------------------------|
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| SUBTOTAL | | | | | Enter on Summary Page, Line 17 only. | |

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

| | |
|--|----------------------------|
| Statement covers period from <u>01/01/2017</u> through <u>12/31/2017</u> | CALIFORNIA FORM 460 |
| Page <u>51</u> of <u>65</u> | I.D. Number 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---|--|---|----------------------------------|---------------------------|---|---------------------------------------|
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

| | | | |
|-------------------------|------------|----------------------------|--|
| Statement covers period | | SCHEDULE D | |
| from | 01/01/2017 | CALIFORNIA FORM 460 | |
| through | 12/31/2017 | Page 52 of 65 | |
| | | I.D. NUMBER 1399704 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ben Pak for Board of Equalization 2018

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|---|--|------------------------------|-----------------------|--|--|
| 12/21/2017 | San Fernando Valley Young Democrats | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$100.00 | \$100.00 | |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| | | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | | | |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| | | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | | | |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |

SUBTOTAL \$100.00

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) **\$100.00**
- Unitemized contributions and independent expenditures made this period of under \$100 **\$0.00**
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$100.00**

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

| | | |
|--|--|---|
| Statement covers period from 01/01/2017 through 12/31/2017 | | CALIFORNIA FORM 460 Page 53 of 65 |
| I.D. NUMBER 1399704 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$6.94 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$13.50 |
| HSG Campaigns Los Angeles, CA 90017 | CNS | | | \$2,500.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

| | |
|--|--------------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$38,830.37 |
| 2. Unitemized payments made this period of under \$100. | \$60.00 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$0.00 |
| 4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$38,890.37 |

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

| | | |
|---|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through 12/31/2017 | | Page 54 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| US Bank Long Beach, CA 90802 | | | Credit Card Payment | \$1,154.11 |
| NetFile Ahwahnee, CA 93601 | OFC | | | \$150.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$11.75 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$23.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$16.25 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

| | | |
|---|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through 12/31/2017 | | Page 55 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$7.00 |
| Design & Art Los Angeles, CA 90005 | | | Website/business cards | \$755.00 |
| US Bank Long Beach, CA 90802 | | | Credit Card Payment | \$951.46 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$9.50 |
| Woodland Hills Printing Woodland Hills, CA 91364 | LIT | | | \$168.16 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

| | | |
|---|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through 12/31/2017 | | Page 56 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
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| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$51.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$40.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |
| Integrated Political Strategies, LLC Studio City, CA 91604 | LIT | | | \$25,000.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$225.50 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|---|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through 12/31/2017 | | Page 57 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$10.45 |
| Crummitt & Associates Long Beach, CA 90802 | PRO | | | \$775.00 |
| Trusted Messenger Marketing Los Angeles, CA 90067 | WEB | | | \$1,500.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$9.50 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|---|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2017 | |
| through 12/31/2017 | | Page 58 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |
| BKAA La Canada Flintridge, CA 91011 | CVC | | | \$250.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |
| Trusted Messenger Marketing Los Angeles, CA 90067 | WEB | | | \$500.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fee | \$16.75 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|---|--|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 01/01/2017 | | |
| through 12/31/2017 | | Page 59 of 65 |
| NAME OF FILER Ben Pak for Board of Equalization 2018 | | I.D. NUMBER 1399704 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-----------------------------|-------------|
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |
| Jacqueline Lucile Tiven Los Angeles, CA 90006 | CNS | | | \$3,500.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$5.00 |
| E-Fundraising Connections Sacramento, CA 95814 | | | Credit Card Processing Fees | \$130.50 |
| Crummitt & Associates Long Beach, CA 90802 | PRO | | | \$1,025.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$38,830.37

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 01/01/2017
through 12/31/2017

CALIFORNIA
FORM 460

Page 60 of 65

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| HSG Campaigns Los Angeles, CA 90017 | Consulting/Digital Ads | \$0.00 | \$5,250.00 | \$0.00 | \$5,250.00 |
| Nancy Dolan Los Angeles, CA 90004 | CNS | \$0.00 | \$4,155.60 | \$0.00 | \$4,155.60 |
| Zero Week Solutions Ventura, CA 93001 | CNS | \$0.00 | \$7,635.00 | \$0.00 | \$7,635.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$50,991.65
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \$50,991.65
May be a negative number.

Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2017
through 12/31/2017

CALIFORNIA
FORM 460

Page 61 of 65

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings
- MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads
- RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Independent Printers North Hollywood, CA 91606 | LIT | \$0.00 | \$669.05 | \$0.00 | \$669.05 |
| Integrated Political Strategies, LLC Studio City, CA 91604 | LIT | \$0.00 | \$33,282.00 | \$0.00 | \$33,282.00 |
| | | | | | |
| | | | | | |
| SUBTOTALS | | \$0.00 | \$50,991.65 | \$0.00 | \$50,991.65 |

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 01/01/2017
through 12/31/2017

CALIFORNIA
FORM **460**

Page 62 of 65

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

NAME OF AGENT OR INDEPENDENT CONTRACTOR
US Bank

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|---|-------------|
| JJ Grand Los Angeles, CA 90005 | | | Room for press conference | \$270.00 |
| Magal BBQ Los Angeles, CA 90005 | FND | | 12/3: Candidate + 3 for fundraising event | \$145.71 |
| Sushi Ko Los Angeles, CA 90010 | TRC | | 10/25: meals for candidate + 5 | \$141.82 |
| Southwest Airlines Dallas, TX 75235 | TRC | | 11/14: Round trip airfare for candidate LA/Sacramento for endorsement meeting | \$267.96 |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$825.49

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 01/01/2017
through 12/31/2017

CALIFORNIA
FORM **460**

Page 63 of 65

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

NAME OF AGENT OR INDEPENDENT CONTRACTOR
US Bank

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| San Fernando Valley Young Democrats Covina, CA 91722 | CTB | | | \$100.00 |
| 1274758 | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$100.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

| | |
|--|----------------------------|
| Statement covers period from 01/01/2017 through 12/31/2017 | CALIFORNIA FORM 460 |
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

| FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT LOANED THIS PERIOD | (c) REPAYMENT OR FORGIVENESS THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST RECEIVED | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE LOANS TO DATE |
|--|---|---|--|--|---|-----------------------------|--------------------------------------|---------------------------------------|
| | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____ % RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____ % RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| *Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E. | | SUBTOTALS | | | | | | |

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

- Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.)
(Enter the net here and on the Summary Page, Column A, Line 7.)

NET _____
(May be a negative number)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 01/01/2017

through 12/31/2017

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ben Pak for Board of Equalization 2018

I.D. NUMBER
1399704

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|------------------|---|------------------------|-------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$.00
- Unitemized increases to cash under \$100 this period..... \$.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$.00

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